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FAX COVER SHEET

FAX NUMBER TRANSMITTED TO: (571) 273-8300

To: US Patent and Trademark Office
Art Unit: 1617
Examiner: Ramachandran, Umamaheswari
Serial No.: 10/690,169
Inventor(s): R. Kent Hermsmeyer
Title: ESTROGEN BETA RECEPTOR AGONISTS TO PREVENT OR
REDUCE THE SEVERITY OF CARDIOVASCULAR DISEASE
Filed: October 21, 2003
From: Howard Eisenberg
Atty Docket No.: HME/7961.0013
Date: December 18, 2006

DOCUMENTS	NUMBER OF PAGES*
Transmittal Form	One
Fee Transmittal Form	One
Response to Requirement for Restriction	Two

* NOT COUNTING COVER SHEET. IF YOU DO NOT RECEIVE ALL PAGES, PLEASE TELEPHONE US
IMMEDIATELY AT (215) 453-9237.

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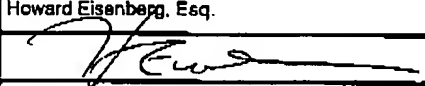
PTO/SB/21 (09-06)

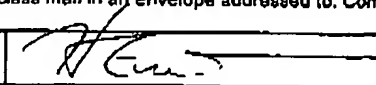
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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/690,169	
	Filing Date	October 21, 2003	
	First Named Inventor	R. Kant Hermameyer	
	Art Unit	1617	
	Examiner Name	Ramachandran, Umamaheswari	
Total Number of Pages In This Submission	4	Attorney Docket Number	HME/7961.0013

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	Howard Eisenberg, Esq.		
Signature			
Printed name	Howard Eisenberg		
Date	December 18, 2006	Reg. No.	36,789

CERTIFICATE OF TRANSMISSION/MAILING			
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:			
Signature			
Typed or printed name	Howard Eisenberg	Date	December 18, 2006

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PTO/SB/17 (07-06)

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Effective on 12/09/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). FEE TRANSMITTAL For FY 2006		Complete if Known Application Number 10/690,169 Filing Date October 21, 2003 First Named Inventor R. Kent Hermismeyer Examiner Name Ramachandran, Umamaheswari Art Unit 1617 Attorney Docket No. HME/7961.0013	
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		RECEIVED CENTRAL FAX CENTER DEC 18 2006	
TOTAL AMOUNT OF PAYMENT (\$) 0			

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☒ None ☐ Other (please identify): _____
☐ Deposit Account Deposit Account Number: 50-1773 Deposit Account Name: _____
 For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)
☐ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee
☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 ☒ Credit any overpayments

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FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	200	100
Multiple dependent claims	360	180
Total Claims	Extra Claims	Fee (\$)
23 - 20 or HP = 0	25	0
HP = highest number of total claims paid for, if greater than 20.		
Indep. Claims	Extra Claims	Fee (\$)
2 - 3 or HP = 0	100	0
HP = highest number of independent claims paid for, if greater than 3.		
Multiple Dependent Claims		
Fee (\$)	Fee Paid (\$)	

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
100	0	0	0	0

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge):

Fees Paid (\$)

SUBMITTED BY		
Signature	Registration No. (Attorney/Agent) 36,789	Telephone (215) 453-9237
Name (Print/Type) Howard Eisenberg	Date December 18, 2006	

This collection of information is required by 37 CFR 1.138. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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Atty Doc. No. HME/7961.0013

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

PATENT APPLICATION EXAMINING OPERATIONS

In re the Application of :
R. Kent Hermsmeyer : Group Art Unit: 1617
Serial No. 10/690,169 : Examiner: Ramachandran, Umamaheswari
Filed: October 21, 2003 : Date: December 18, 2006
For a Patent for :
ESTROGEN BETA RECEPTOR AGONISTS
TO PREVENT OR REDUCE THE SEVERITY
OF CARDIOVASCULAR DISEASE

RESPONSE TO REQUIREMENT FOR RESTRICTION UNDER 37 CFR §1.143

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

Applicant submits the following in response to the Requirement for Restriction
that was mailed on December 1, 2006.

In the Requirement for Restriction, the Examiner divided the claims into two
groups, as follows:

Group I = claims 1-16, drawn to a method for treatment, and

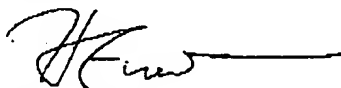
Group II = claims 17-23, drawn to a kit.

Applicant hereby elects for present prosecution the claims of Group I, claims 1-16,
drawn to a method for treatment.

The Examiner has also indicated that, in the event that Applicant elects Group I, Applicant must further elect a single species of those listed in claim 12, incorrectly stated in the Requirement for Restriction as claim 11, from among estrogen, androgen, and progestin. Applicant hereby elects progestin. It is noted that claims 1 and 11 are generic claims from which claim 12 depends. Applicant hereby elects progestin as the species.

Applicant submits that the elected claims are in condition for allowance and requests an early notice to that effect.

Respectfully submitted,

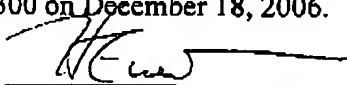


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CERTIFICATE OF FACSIMILE TRANSMISSION

I hereby certify that this correspondence is being deposited by facsimile transmission to the Patent and Trademark Office at (571) 273-8300 on December 18, 2006.

Dated: December 18, 2006



Howard M. Eisenberg